

FORM
42
Rev
03/12



OGCC RECEPTION

Receive Date:
10/29/2012

Document Number:
400340507

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19160 Contact Person: Justin Carlile
Company Name: CONOCO PHILLIPS COMPANY Phone: (432) 688-9165
Address: P O BOX 2197 Fax: (432) 688-6019
City: HOUSTON State: TX Zip: 77252-2197 Email: justin.carlile@conocophillips.com
API #: 05 - 001 - 09759 - 00 Facility ID: _____ Location ID: _____
Facility Name: State of Colorado 36 1
Sec: 36 Twp: 3s Range: 64w QtrQtr: NWSE Lat: 39.744692 Long: -104.498450

NOTICE OF CONSTRUCTION OF A NEW LOCATION OR MAJOR CHANGE – 48-hour notice required

Start Date: 11/01/2012

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Justin Carlile Email: justin.carlile@conocophillips.com
Signature: Justin Carlile Title: Regulatory Specialist Date: 10/29/2012